

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Attorney Docket No.:

60291.000048

In re Application Of Roy Knechtel
 Application Number 10/595,303
 Filed May 19, 2006
 For METHOD AND DEVICE FOR SECURE, INSULATED AND
 ELECTRICALLY CONDUCTIVE ASSEMBLING OF TREATED
 SEMICONDUCTOR WAFERS
 Confirmation No. 7114
 Group Art Unit 2823
 Examiner Kevin A. Parendo

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate fee is as follows:

- | | Large Entity | Small Entity | Amount |
|-----------------------------------------------|--------------|--------------|-----------------|
| <input checked="" type="checkbox"/> One Month | \$ 130.00 | \$ 65.00 | \$130.00 |
| <input type="checkbox"/> Two Month | \$ 490.00 | \$ 245.00 | \$ |
| <input type="checkbox"/> Three Month | \$1110.00 | \$ 555.00 | \$ |
| <input type="checkbox"/> Four Month | \$1730.00 | \$ 865.00 | \$ |
| <input type="checkbox"/> Five Month | \$2350.00 | \$1175.00 | \$ |
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
☐ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **50-0206**.
- I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;
☒ attorney or agent of record.
☐ attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

November 15, 2010

Date

Signature

Dalei Dong

Typed or Printed Name

60,363

Registration Number (if applicable)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of ____ form(s) is/are submitted.